

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 21
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Scott NICKNAME LAST SUFFIX Johnson		OFFICE USE ONLY Date Received RECEIVED MAY 06 2011 City Secretary's Office 3:42 pm tlf Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6072 Dripping Springs Dr. Frisco, TX 75034		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 929-1189		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Tyne NICKNAME LAST SUFFIX Berlanga		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 15509 Wyoming Frisco, TX 75035		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 437-7721		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 4 / 5 / 11 5 / 4 / 11		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 5 / 14 / 11		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	Frisco City Council, Place 6	Re-election	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE. Name Address / PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

Scott Johnson

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages18 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)\$ 22,810.⁰⁰EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 21,796.⁰⁶CONTRIBUTION
BALANCE

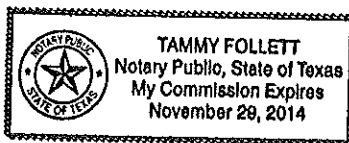
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 20,069.⁴²OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Scott Johnson, this the 6th day of May, 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 9	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/26/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kline, Roy	7 Amount of contribution (\$) \$100. ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 556 Rockledge Ct. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Visconti, Anna	Amount of contribution (\$) \$10. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 581 Rock Ledge Ct. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jost, Leota	Amount of contribution (\$) \$25. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 367 Pebble Beach Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharp, Robert & Dianna	Amount of contribution (\$) \$100. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7614 Pasatiempo Dr Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Born, Sharon	Amount of contribution (\$) \$100. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7241 Reflection Bay Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/1/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Keating, Leslie + John 6 Contributor address; City; State; Zip Code 4749 Jerral Dr. Frisco, TX 75034	7 Amount of contribution (\$) \$1,000. ⁰⁰	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/29/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Barnes, Michael + Jennifer Contributor address; City; State; Zip Code 5008 Monterey Dr. Frisco, TX 75034	Amount of contribution (\$) \$1,000. ⁰⁰	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Albinson, Timothy Contributor address; City; State; Zip Code 3334 Folsom St San Francisco, CA 94110	Amount of contribution (\$) \$50. ⁰⁰	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Medigovich, Robert Contributor address; City; State; Zip Code P.O. Box 2415 Frisco, TX 75034	Amount of contribution (\$) \$400. ⁰⁰	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lyon, Carol S. Contributor address; City; State; Zip Code 7218 Bay Hill Dr. Frisco, TX 75034	Amount of contribution (\$) \$100. ⁰⁰	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/26/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Woods, Michael + Linda 6 Contributor address; City; State; Zip Code 7091 Glen Abbey Ct. Frisco, TX 75034	7 Amount of contribution (\$) \$50. ⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 4/26/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TREPAC/Texas Assoc. of Realtors Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768	Amount of contribution (\$) \$500. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/21/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Fletcher, Richard + Janey Contributor address; City; State; Zip Code 5450 Quail Run Frisco, TX 75034	Amount of contribution (\$) \$250. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/16/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brown, Kurt + Jennifer Contributor address; City; State; Zip Code 5922 Van Horn Frisco, TX 75034	Amount of contribution (\$) \$25. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/12/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Proctor, Brian + Karin Contributor address; City; State; Zip Code 5755 Sweeney Tr. Frisco, TX 75034	Amount of contribution (\$) \$1,000. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Scott Johnson

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/11/11

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Busch, David

6 Contributor address; City; State; Zip Code

4670 Gresham Dr. El Dorado Hills, CA
957627 Amount of
contribution (\$)\$1,000.⁰⁰8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/11/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Abernathy, R. or L.

Contributor address; City; State; Zip Code

7422 Saint Petersburg St. Frisco, TX 75034

Amount of
contribution (\$)\$50.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/9/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Takala, Brad + Lisa

Contributor address; City; State; Zip Code

5964 Dripping Springs Dr. Frisco, TX 75034

Amount of
contribution (\$)\$100.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Wagner, John + Christine

Contributor address; City; State; Zip Code

3812 Southwestern Blvd Dallas, TX 75225

Amount of
contribution (\$)\$2,500.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Wagner, Mark

Contributor address; City; State; Zip Code

5771 Preston Haven Dr. Dallas, TX 75230

Amount of
contribution (\$)\$2,500.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Scott Johnson

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/5/11

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Sanders, Rodger

6 Contributor address; City; State; Zip Code

3656 Maplewood Ave Dallas, TX 75205

7 Amount of
contribution (\$)\$3,000.⁰⁰8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/5/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Shaddock, Peter

Contributor address; City; State; Zip Code

58 Braewood Place Dallas, TX 75248

Amount of
contribution (\$)\$2,500.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/5/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Clark, Dale + Linda

Contributor address; City; State; Zip Code

16250 Dallas Pkwy, Ste 210 Dallas, TX 75248

Amount of
contribution (\$)\$750.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/5/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Darling, William + Priscilla

Contributor address; City; State; Zip Code

2500 Legacy Dr. Ste 100 ; Frisco, TX 75034

Amount of
contribution (\$)\$500.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/5/11

Full name of contributor

☐ out-of-state PAC (ID# _____)

Darling, Stephen

Contributor address; City; State; Zip Code

2500 Legacy Dr. Ste 100 ; Frisco, TX 75034

Amount of
contribution (\$)\$500.⁰⁰In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/9/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Akin, Howard	7 Amount of contribution (\$) \$250. ⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 44 Armstrong Dr Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/8/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bond, Ken + Gail	Amount of contribution (\$) \$50. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3529 Nautical Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ronderos, Jaime	Amount of contribution (\$) \$200. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1798 Torrey Pines Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hanebuth, Charles + Carol	Amount of contribution (\$) \$500. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7524 Bay Hill Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Arbuckle, David + Sharyn	Amount of contribution (\$) \$100. ⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3674 Vanguard Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/8/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Miller, John 6 Contributor address; City; State; Zip Code 3156 White Spruce Dr. Frisco, TX 75034	7 Amount of contribution (\$) \$100. ⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 4/6/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Noschese, Greg + Raejean Contributor address; City; State; Zip Code 3206 Granada Dr. Mesquite, TX 75181	Amount of contribution (\$) \$200. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/5/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Darling, Robert + Joyane Contributor address; City; State; Zip Code 1717 Savannah Dr. McKinney, TX 75070	Amount of contribution (\$) \$500. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/5/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Streit, Peter + Tami Contributor address; City; State; Zip Code 5573 Ford Dr. Frisco, TX 75034	Amount of contribution (\$) \$350. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/5/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kynard, Byrle Contributor address; City; State; Zip Code 5222 Cahaba Valley Cove Birmingham, AL 35242	Amount of contribution (\$) \$500. ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/8/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Prieto, Betsy 6 Contributor address; City; State; Zip Code 10 Canyon Crest Ct. Frisco, TX 75034	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) Photography (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/26/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Harebuth, Chuck & Carol Contributor address; City; State; Zip Code 7524 Bay Hill Frisco, TX 75034	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Meet & Greet (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/5/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dodson, Bryan Contributor address; City; State; Zip Code 3554 Norwich Ln. Frisco, TX 75034	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Albright, Betty Lou Contributor address; City; State; Zip Code 7554 St. Petersburg Dr. Frisco, TX 75034	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/1/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Boring, Bob & Marilyn Contributor address; City; State; Zip Code 706 Bay Hill Dr. Frisco, TX 75034	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/1/11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Brandt, Colleen	7 Amount of contribution (\$) \$40.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1031 Harbor Springs Dr. Frisco, TX 75034		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# C.00386029) HNTB PAC	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 715 Kirk Dr. Kansas City, MO 64105		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <div style="text-align: center;">9</div>	2 FILER NAME <div style="text-align: center;">Scott Johnson</div>	3 ACCOUNT # (Ethics Commission Filers)																																										
4 Date <div style="text-align: center;">4/5/11</div>	5 Payee name <div style="text-align: center;">Lowe's</div>																																											
6 Amount (\$) <div style="text-align: center;">\$62.³⁰</div>	7 Payee address; City; State; Zip Code <div style="text-align: center;">3360 Preston Rd. Frisco, TX 75034</div>																																											
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <div style="text-align: center;">Other - Supplies</div>	(b) Description (If travel outside of Texas, complete Schedule T) <div style="text-align: center;">Signage Supplies</div>																																										
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Scott Johnson	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/7/11	5 Payee name Texas Land & Cattle	
6 Amount (\$) \$24.21	7 Payee address; City; State; Zip Code 3191 Preston Rd. Frisco, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) Dinner @ Forum
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/8/11	Payee name Jump For Joy	
Amount (\$) \$285.00	Payee address; City; State; Zip Code 9361 Scan Dr. Frisco, TX 75035	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Bounce House for Kick-off Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/8/11	Payee name Mooyah Burgers	
Amount (\$) \$1,615.21	Payee address; City; State; Zip Code 5500 Preston Rd. #102 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Food for Kick-off Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/8/11	Payee name DJ Tommy Scott	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 632 Fleming Wylie, TX 75098	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) DJ for Kick-off Party
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Scott Johnson</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/8/11</i>		5 Payee name <i>Bobby Roberti</i>			
6 Amount (\$) <i>\$225.03</i>		7 Payee address; City; State; Zip Code <i>3135 Camden Bluff Rd, Frisco, TX 75034</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Event Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Beverages for Kickoff Party</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/9/11</i>		Payee name <i>Fed-Ex Office</i>			
Amount (\$) <i>\$0.78</i>		Payee address; City; State; Zip Code <i>8290 Hwy 121 Stonebriar Mall Frisco, TX 75034</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Printing Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Copies</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/11/11</i>		Payee name <i>Facebook Ads</i>			
Amount (\$) <i>\$31.27</i>		Payee address; City; State; Zip Code <i>156 University Ave Palo Alto, CA 94301</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>Ad on Facebook</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/13/11</i>		Payee name <i>Frisco Area Republicans</i>			
Amount (\$) <i>\$35.00</i>		Payee address; City; State; Zip Code <i>6009 Star Trail Frisco, TX 75034</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Other - Dues</i>		Description (If travel outside of Texas, complete Schedule T) <i>Yearly Membership Dues</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Scott Johnson</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/15/11</i>	5 Payee name <i>Alvin Hoerta</i>	
6 Amount (\$) <i>\$350.⁰⁰</i>	7 Payee address; City; State; Zip Code <i>4163 Peace Dr. Frisco, TX 75034</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Event Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Meet & Greet Food & Beverage</i>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/21/11</i>	Payee name <i>Facebook Ads</i>	
Amount (\$) <i>\$22.⁴⁸</i>	Payee address; City; State; Zip Code <i>156 University Ave. Palo Alto, CA 94301</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising</i>	Description (If travel outside of Texas, complete Schedule T) <i>Ad on Facebook</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/18/11</i>	Payee name <i>Constant Contact</i>	
Amount (\$) <i>\$16.²⁴</i>	Payee address; City; State; Zip Code <i>1601 Trapelo Rd. Waltham, MA 02451</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising</i>	Description (If travel outside of Texas, complete Schedule T) <i>Mailing List - email</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/20/11</i>	Payee name <i>Frisco Lakes Mens Golf Assoc.</i>	
Amount (\$) <i>\$150.⁰⁰</i>	Payee address; City; State; Zip Code <i>7170 Anthem Dr. Frisco, TX 75034</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Sponsorship</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Scott Johnson	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/21/11	5 Payee name Frisco Style	
6 Amount (\$) \$1,000.⁰⁰	7 Payee address; City; State; Zip Code P.O. Box 1676 Frisco, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Ad in Frisco Style
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 4/21/11	Payee name Frisco Dog Park, Inc	
Amount (\$) \$50.⁰⁰	Payee address; City; State; Zip Code 1656 Dowling Ct. Frisco, TX 75034	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Rover Rally
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 4/21/11	Payee name Facebook Ads	
Amount (\$) \$26.⁸⁵	Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Ad on Facebook
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 4/21/11	Payee name Fed-EX Office	
Amount (\$) \$5.²⁵	Payee address; City; State; Zip Code 8290 Hwy 121 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Scott Johnson</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/22/11</i>	5 Payee name <i>Fed-Ex Office</i>	
6 Amount (\$) <i>\$0.87</i>	7 Payee address; City; State; Zip Code <i>8290 Hwy 121 Frisco, TX 75034</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Copies</i>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>4/26/11</i>	Payee name <i>Print Place</i>	
Amount (\$) <i>\$5,940.⁵¹</i>	Payee address; City; State; Zip Code <i>1130 Ave H. East Arlington, TX 76011</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Printing Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Print + Mail of Candidate Info</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>4/22/11</i>	Payee name <i>Star Community Newspapers</i>	
Amount (\$) <i>\$1,500.⁰⁰</i>	Payee address; City; State; Zip Code <i>624 Krona Dr. #170 Plano, TX 75074</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Ad in Frisco Paper</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>4/22/11</i>	Payee name <i>Jason's Deli</i>	
Amount (\$) <i>\$15.⁷⁶</i>	Payee address; City; State; Zip Code <i>8520 Hwy 121 Frisco, TX 75034</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Lunch w/ Campaign Team</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/27/11		5 Payee name Dallas News			
6 Amount (\$) \$858. ⁰⁰		7 Payee address; City; State; Zip Code 508 Young St. Dallas, TX 75202			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising		(b) Description (If travel outside of Texas, complete Schedule T) Ad in Neighbors Gro	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/27/11		Payee name Print Place			
Amount (\$) \$2050. ³⁸		Payee address; City; State; Zip Code 1130 Ave H. East Arlington, TX 76011			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Print & Mail of Candidate Info	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/28/11		Payee name Facebook Ads			
Amount (\$) \$18. ¹⁸		Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertis. ing		Description (If travel outside of Texas, complete Schedule T) Ad on Facebook	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/28/11		Payee name Frisco Tea Party			
Amount (\$) \$250. ⁰⁰		Payee address; City; State; Zip Code 4308 Shamrock Dr. Frisco, TX 75034			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) 'Boots & Balloons' Tickets	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Scott Johnson</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/28/11</i>		5 Payee name <i>PayPal</i>			
6 Amount (\$) <i>\$0.18</i>		7 Payee address; City; State; Zip Code <i>P.O. Box 45950 Omaha, NE 68145</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Accounting/Banking</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Account Verification</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5/1/11</i>		Payee name <i>Frisco Lakes Golf Club</i>			
Amount (\$) <i>\$600.⁰⁰</i>		Payee address; City; State; Zip Code <i>7170 Anthem Dr. Frisco, TX 75034</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Meet & Greet</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/29/11</i>		Payee name <i>Denise Midgley</i>			
Amount (\$) <i>\$95.⁰⁰</i>		Payee address; City; State; Zip Code <i>2608 Stone Creek Dr. Plano, TX 75075</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Collin County Lincoln Day Dinner Ticket</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5/4/11</i>		Payee name <i>Facebook Ads</i>			
Amount (\$) <i>\$19.²⁰</i>		Payee address; City; State; Zip Code <i>15b University Ave. Palo Alto, CA 94301</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T) <i>Ad on Facebook</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Scott Johnson</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>5/4/11</i>	5 Payee name <i>Monkey Tag</i>
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6 Amount (\$) <i>\$1,500.00</i>	7 Payee address; City; State; Zip Code <i>4101 W. Green Oaks J Ste 305 Arlington, TX 76016</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Graphic Design</i>
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>5/4/11</i>	Payee name <i>Project LO</i>
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Amount (\$) <i>\$1,500</i>	Payee address; City; State; Zip Code <i>2300 McDermott Dr. J Ste 200-113 Plano, TX 75025</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1		2 FILER NAME Scott Johnson		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/4/11		5 Payee name Mandi Hawkins			
6 Amount (\$) \$600.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 525 South Maxwell Creek Wylie, TX 75098			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract		(b) Description (If travel outside of Texas, complete Schedule T) Contract Labor For Campaign Services	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	

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